

**TABLE 1
MEDICAID BENEFICIARIES AND EXPENDITURES
TOTAL AND FEE-FOR-SERVICE (FFS)
NEW HAMPSHIRE, CALENDAR YEAR 1999**

Population Characteristics	Beneficiaries				Expenditures			
	Total Number	Percent of Total Beneficiaries	Number in Fee-for-Service (FFS) One or More Months	Percent in FFS One or More Months	Total Expenditures	Percent of Total Expenditures	Total for FFS	Percent for FFS
All	106,887	100%	105,052	98%	\$619,384,716	100%	\$606,873,584	98%
Age								
0-3	15,553	15%	15,235	98%	\$22,211,790	4%	\$20,157,485	91%
4-5	7,276	7%	7,058	97%	\$8,234,986	1%	\$7,013,860	85%
6-12	24,091	23%	23,307	97%	\$52,319,719	8%	\$47,235,648	90%
13-18	14,894	14%	14,586	98%	\$47,848,615	8%	\$45,591,828	95%
19-21	3,932	4%	3,921	100%	\$13,333,849	2%	\$13,107,892	98%
22-44	20,411	19%	20,223	99%	\$143,998,328	23%	\$142,474,825	99%
45-64	7,971	7%	7,963	100%	\$107,951,694	17%	\$107,833,519	100%
65 and older	12,748	12%	12,748	100%	\$223,485,735	36%	\$223,458,527	100%
Gender								
Female	63,587	59%	62,601	98%	\$375,497,935	61%	\$369,003,713	98%
Male	43,300	41%	42,451	98%	\$243,886,781	39%	\$237,869,871	98%
Race								
White	102,168	96%	100,556	98%	\$609,624,801	98%	\$598,225,364	98%
Black	1,444	1%	1,386	96%	\$4,024,326	1%	\$3,671,653	91%
Hispanic	2,103	2%	1,963	93%	\$3,798,877	1%	\$3,165,286	83%
American Indian/Alaskan Native	55	0%	55	100%	\$185,677	0%	\$177,976	96%
Asian/Pacific Islander	775	1%	752	97%	\$1,462,753	0%	\$1,357,495	93%
Other/Unknown	342	0%	340	99%	\$288,282	0%	\$275,810	96%
Dual Status								
Aged Duals with Full Medicaid	10,982	10%	10,982	100%	\$212,087,320	34%	\$212,062,585	100%
Disabled Duals with Full Medicaid	6,443	6%	6,443	100%	\$138,182,046	22%	\$138,149,941	100%
Duals with Limited Medicaid	1,279	1%	1,279	100%	\$3,071,159	1%	\$3,067,160	100%
Other Duals	707	1%	705	100%	\$2,937,924	0%	\$2,890,187	98%
Disabled Non-Duals	6,272	6%	6,272	100%	\$92,346,296	15%	\$92,315,367	100%
All Other Non-Duals	81,204	76%	79,371	98%	\$170,759,971	28%	\$158,388,344	93%
Eligibility Group								
Aged	12,688	12%	12,688	100%	\$222,134,295	36%	\$222,106,936	100%
Disabled	13,368	13%	13,368	100%	\$233,591,792	38%	\$233,527,740	100%
Adults	16,397	15%	16,196	99%	\$32,403,835	5%	\$30,775,976	95%
Children	64,433	60%	62,799	97%	\$131,251,948	21%	\$120,461,346	92%

Notes: Months are defined as fee-for-service (FFS) if they are months when an individual is enrolled in Medicaid but not in a Medicaid capitated comprehensive managed care or behavioral managed care plan. For subsequent tables, only FFS months are included.

Beneficiaries are all individuals enrolled in Medicaid, including children in Medicaid-SCHIP, for at least one month in the calendar year.

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

**TABLE 2
 MEDICAID FFS MENTAL HEALTH BENEFICIARIES AND EXPENDITURES
 COMPARED TO TOTAL FFS BENEFICIARIES AND EXPENDITURES
 NEW HAMPSHIRE, CALENDAR YEAR 1999**

	Total Number of Beneficiaries in FFS Population	FFS Mental Health Population		Total Expenditures for FFS Population	FFS Expenditures for Mental Health Population	
		Number of Beneficiaries	Percent of Total FFS Beneficiaries		Total Amount	Percent of Total FFS Expenditures
All	105,052	19,190	18%	\$606,873,584	\$214,076,996	35%
Age						
0-3	15,235	283	2%	\$20,157,485	\$1,011,379	5%
4-5	7,058	622	9%	\$7,013,860	\$2,166,387	31%
6-12	23,307	4,566	20%	\$47,235,648	\$25,128,549	53%
13-18	14,586	3,447	24%	\$45,591,828	\$26,671,774	59%
19-21	3,921	540	14%	\$13,107,892	\$5,364,950	41%
22-44	20,223	5,664	28%	\$142,474,825	\$66,368,058	47%
45-64	7,963	2,644	33%	\$107,833,519	\$47,903,790	44%
65 and Older	12,748	1,424	11%	\$223,458,527	\$39,462,109	18%
Gender						
Female	62,601	11,052	18%	\$369,003,713	\$120,118,441	33%
Male	42,451	8,138	19%	\$237,869,871	\$93,958,555	40%
Race						
White	100,556	18,755	19%	\$598,225,364	\$210,792,976	35%
Black	1,386	191	14%	\$3,671,653	\$1,577,468	43%
Hispanic	1,963	190	10%	\$3,165,286	\$1,318,763	42%
American Indian/Alaskan Native	55	11	20%	\$177,976	\$65,687	37%
Asian/Pacific Islander	752	31	4%	\$1,357,495	\$303,468	22%
Other/Unknown	340	12	4%	\$275,810	\$18,634	7%
Dual Status						
Aged Duals with Full Medicaid	10,982	1,290	12%	\$212,062,585	\$35,850,588	17%
Disabled Duals with Full Medicaid	6,443	2,689	42%	\$138,149,941	\$56,442,831	41%
Duals with Limited Medicaid	1,279	111	9%	\$3,067,160	\$948,314	31%
Other Duals	705	227	32%	\$2,890,187	\$1,503,257	52%
Disabled Non-Duals	6,272	2,668	43%	\$92,315,367	\$49,172,286	53%
All Other Non-Duals	79,371	12,205	15%	\$158,388,344	\$70,159,720	44%
Eligibility Group						
Aged	12,688	1,418	11%	\$222,106,936	\$39,260,892	18%
Disabled	13,368	5,461	41%	\$233,527,740	\$106,746,496	46%
Adults	16,196	3,156	19%	\$30,775,976	\$12,419,392	40%
Children	62,799	9,155	15%	\$120,461,346	\$55,650,216	46%

Note: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

TABLE 3
MEDICAID FFS MENTAL HEALTH POPULATION
BY DIAGNOSTIC CATEGORY AND AGE GROUP
NEW HAMPSHIRE, CALENDAR YEAR 1999

Diagnostic Category	FFS Mental Health Population							
	All Ages		21 and Under		22-64		65 and Older	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Schizophrenia	1,800	9%	43	0%	1,505	18%	252	18%
Major depression and affective psychoses	3,433	18%	648	7%	2,411	29%	374	26%
Other psychoses	505	3%	39	0%	229	3%	237	17%
Childhood psychoses	256	1%	219	2%	36	0%	1	0%
Neurotic & other depressive disorders	3,495	18%	1,083	11%	2,024	24%	388	27%
Personality disorders	417	2%	29	0%	370	4%	18	1%
Other mental disorders	185	1%	35	0%	92	1%	58	4%
Special symptoms or syndromes	311	2%	191	2%	117	1%	3	0%
Stress & adjustment reactions	4,810	25%	3,369	36%	1,352	16%	89	6%
Conduct disorders	711	4%	613	6%	96	1%	2	0%
Emotional disturbances	1,006	5%	1,000	11%	5	0%	1	0%
Hyperkinetic syndrome	2,260	12%	2,188	23%	71	1%	1	0%
No Diagnosis	1	0%	1	0%	0	0%	0	0%
Total	19,190	100%	9,458	100%	8,308	100%	1,424	100%

Notes: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

The diagnostic category for each user is the one that occurred most frequently among primary diagnoses on claims during the year.

Schizophrenia (ICD-9 CM diagnosis codes beginning with 295) includes both chronic and acute schizophrenic disorders.

Major depression and affective psychoses (ICD-9 CM diagnosis codes beginning with 296) includes manic, depressive, and bipolar disorders.

Other psychoses (ICD-9 CM diagnosis codes beginning with 297 or 298) includes paranoid states, delusional disorders, depressive psychosis, and reactive psychoses.

Childhood psychoses (ICD-9 CM diagnosis codes beginning with 299) includes infantile autism, disintegrative disorders, and childhood type schizophrenia.

Neurotic & other depressive disorders (ICD-9 CM diagnosis codes beginning with 300 or 311) includes anxiety states; phobic, obsessive compulsive, and other neurotic disorders; and unspecified depressive disorders.

Personality disorders (ICD-9 CM diagnosis codes beginning with 301) includes affective, schizoid, explosive, histrionic, antisocial, dependent, and other personality disorders.

Other mental disorders (ICD-9 CM diagnosis codes beginning with 302, 306, or 310) includes sexual deviations, physiological malfunction arising from mental factors, and nonpsychotic mental disorders due to organic brain damage.

Special symptoms or syndromes (ICD-9 CM diagnosis codes beginning with 307) includes eating disorders, tics and repetitive movement disorders, sleep disorders, and enuresis.

Stress & adjustment reactions (ICD-9 CM diagnosis codes beginning with 308 or 309) includes acute reaction to stress; depressive reaction, and separation disorders, and conduct disturbance.

Conduct disorders (ICD-9 CM diagnosis codes beginning with 312) includes aggressive outbursts, truancy, delinquency, kleptomania, impulse control disorder, and other conduct disorders.

Emotional disturbances (ICD-9 CM diagnosis codes beginning with 313) includes overanxious disorder, shyness, relationship problems and other mixed emotional disturbances of childhood or adolescence such as oppositional disorder.

Hyperkinetic syndrome (ICD-9 CM diagnosis codes beginning with 314) includes attention deficit with and without hyperactivity and hyperkinesis with or without developmental delay.

**TABLE 4
PSYCHIATRIC AND GENERAL INPATIENT HOSPITAL USE AND AVERAGE ANNUAL HOSPITAL DAYS PER USER
FOR MEDICAID FFS MENTAL HEALTH POPULATION, BY SEX AND AGE GROUP
NEW HAMPSHIRE, CALENDAR YEAR 1999**

Sex	Age Group	Psychiatric Hospital		General Inpatient Hospital		Total Inpatient Hospital			General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses		
		Number of Users	Average Annual Days Per User	Mental Health Treatment		Mental Health Treatment			Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User
				Number of Users	Average Annual Days Per User	Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User			
Female	0-3	0	0	1	2	1	1%	2	11	9%	6
	4-5	0	0	0	0	0	0%	0	0	0%	0
	6-12	17	16	4	14	21	1%	15	17	1%	3
	13-18	33	21	84	11	105	6%	15	68	4%	3
	19-21	12	38	29	11	37	10%	21	98	25%	3
	22-44	0	0	202	11	202	5%	11	619	15%	4
	45-64	0	0	61	13	61	3%	13	283	16%	6
	65+	1	8	7	12	7	1%	13	169	15%	1
All Ages	63	22	388	11	434	4%	13	1,265	11%	4	
Male	0-3	0	0	1	4	1	1%	4	8	5%	6
	4-5	1	16	0	0	1	0%	16	5	1%	3
	6-12	57	21	9	8	65	2%	20	27	1%	8
	13-18	47	17	45	13	88	5%	15	30	2%	3
	19-21	6	37	7	15	11	7%	30	6	4%	7
	22-44	0	0	65	10	65	4%	10	151	10%	6
	45-64	0	0	28	16	28	3%	16	140	16%	7
	65+	2	92	2	15	4	1%	53	49	18%	2
All Ages	113	21	157	12	263	3%	16	416	5%	6	
Total	0-3	0	0	2	3	2	1%	3	19	7%	6
	4-5	1	16	0	0	1	0%	16	5	1%	3
	6-12	74	20	13	10	86	2%	19	44	1%	6
	13-18	80	18	129	12	193	6%	15	98	3%	3
	19-21	18	38	36	12	48	9%	23	104	19%	3
	22-44	0	0	267	11	267	5%	11	770	14%	4
	45-64	0	0	89	14	89	3%	14	423	16%	6
	65+	3	64	9	13	11	1%	28	218	15%	2
All Ages	176	22	545	11	697	4%	14	1,681	9%	4	

Notes: All beneficiaries in this table had a mental health diagnosis as the primary diagnosis on a FFS Medicaid claim during 1999, or received a clearly identifiable mental health service (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Those who received inpatient hospital services for which the primary diagnosis on the hospital claim was a mental health diagnosis are shown in the "General Inpatient Hospital – Mental Health Treatment" column. Those who received inpatient hospital services for which the primary diagnosis on the claim was not a mental health diagnosis are shown in the "General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses" column.

When a dually eligible beneficiary's inpatient stay is primarily covered by Medicare, Medicaid often pays a deductible. Some states interpret their payment of the deductible as Medicaid coverage for one day of the stay. Other states interpret "Medicaid covered days" as including only days covered in full by Medicaid, and thus report zero covered days on a crossover stay. Another group of states reports the number of days covered by Medicare as covered days. Finally, many states do not retain any details about lengths of stay on crossover claims. For any one or combination of these reasons, average lengths of stay for beneficiaries who are dually eligible (most aged and some adults) are inaccurately reduced because of the presence of individual claims with "1" or "0" covered days. In some circumstances this even causes inpatient hospital stays to average "0" days in length, and it explains more generally the low numbers that appear for some groups on Table 4.

Individuals may appear in more than one column on this table.

**TABLE 5
EMERGENCY ROOM USE FOR MEDICAID FFS MENTAL HEALTH AND NON-MENTAL
HEALTH BENEFICIARIES, BY SEX AND AGE GROUP
NEW HAMPSHIRE, CALENDAR YEAR 1999**

Sex	Age Group	Mental Health Beneficiaries With Any Emergency Room Use					Non- Mental Health Beneficiaries With Any Emergency Room Use		
		Number	Percent of Total FFS Mental Health Beneficiaries	Average Number of Emergency Room Visits for Users of Any ER Visits			Number	Percent of Total FFS Non-Mental Health Beneficiaries	Number of Emergency Room Visits for Users of Any ER Visits
				For Mental Health Treatment	For Non-Mental Health Treatment	All ER Visits			
Female	0-3	58	48%	0.10	1.91	2.02	1,994	28%	1.78
	4-5	72	28%	0.04	1.71	1.75	615	20%	1.47
	6-12	459	28%	0.07	1.60	1.67	1,556	16%	1.49
	13-18	645	39%	0.31	2.04	2.35	1,135	20%	1.64
	19-21	216	56%	0.44	2.51	2.95	759	29%	1.95
	22-44	2,037	50%	0.40	2.69	3.09	2,850	25%	1.96
	45-64	713	40%	0.42	2.46	2.88	747	24%	1.95
	65+	227	20%	0.22	1.80	2.02	941	11%	1.51
	All Ages	4,427	40%	0.34	2.37	2.70	10,597	21%	1.75
Male	0-3	78	48%	0.12	1.85	1.96	2,311	30%	1.87
	4-5	125	34%	0.03	1.75	1.78	726	22%	1.54
	6-12	839	29%	0.15	1.43	1.57	1,442	16%	1.44
	13-18	654	36%	0.21	1.66	1.86	978	18%	1.49
	19-21	57	38%	0.61	1.77	2.39	113	15%	1.74
	22-44	556	35%	0.53	2.27	2.80	661	21%	1.98
	45-64	276	32%	0.57	2.55	3.13	504	23%	1.90
	65+	55	20%	0.24	1.71	1.95	298	12%	1.50
	All Ages	2,640	32%	0.29	1.82	2.11	7,033	21%	1.69
Total	0-3	136	48%	0.11	1.88	1.99	4,305	29%	1.83
	4-5	197	32%	0.04	1.74	1.77	1,341	21%	1.51
	6-12	1,298	28%	0.12	1.49	1.61	2,998	16%	1.47
	13-18	1,299	38%	0.26	1.85	2.11	2,113	19%	1.57
	19-21	273	51%	0.48	2.36	2.83	872	26%	1.92
	22-44	2,593	46%	0.42	2.60	3.03	3,511	24%	1.96
	45-64	989	37%	0.47	2.49	2.95	1,251	24%	1.93
	65+	282	20%	0.22	1.78	2.00	1,239	11%	1.51
	All Ages	7,067	37%	0.32	2.16	2.48	17,630	21%	1.73

Notes: An emergency room visit is classified as "for mental health treatment" if one of the mental health diagnoses in Table 3 is shown as the primary diagnosis on the emergency room claim. If any other diagnosis is shown as the primary diagnosis on the claim, the emergency room visit is classified as being for non-mental health treatment. Visits are defined by unique dates of service.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 6
PRESCRIPTION PSYCHOTROPIC DRUG USE FOR MEDICAID FFS MENTAL HEALTH
AND NON-MENTAL HEALTH BENEFICIARIES, BY AGE GROUP
NEW HAMPSHIRE, CALENDAR YEAR 1999

Age Group	Total FFS Beneficiaries with Any Psychotropic Drug Use		FFS Mental Health Beneficiaries with Any Psychotropic Drug Use		FFS Non-Mental Health Beneficiaries with Any Psychotropic Drug Use	
	Number	Percent of Total FFS Beneficiaries	Number	Percent of Total FFS MH Beneficiaries	Number	Percent of Total FFS Non-MH Beneficiaries
0-3	422	3%	32	11%	390	3%
4-5	314	4%	119	19%	195	3%
6-12	3,145	13%	2,140	47%	1,005	5%
13-18	2,774	19%	1,923	56%	851	8%
19-21	594	15%	315	58%	279	8%
22-44	7,553	37%	4,510	80%	3,043	21%
45-64	4,607	58%	2,392	90%	2,215	42%
65+	7,002	55%	1,226	86%	5,776	51%
All Ages	26,411	25%	12,657	66%	13,754	16%

Notes: FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during 1999 (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Psychotropic drugs are defined as drugs in any of the categories shown on Table 7, as grouped by Multum prescription drug grouping software.

Non-mental health beneficiaries who are dual eligibles may have received mental health treatment under Medicare that is not seen in Medicaid coinsurance claims.

TABLE 7
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 21 AND UNDER WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
NEW HAMPSHIRE, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	43	49%	74%	30%	7%	7%	65%	5%
Major depression and affective psychoses	648	59%	24%	17%	12%	12%	37%	20%
Other psychoses	39	33%	49%	31%	0%	5%	41%	13%
Childhood psychoses	219	28%	19%	16%	0%	14%	24%	34%
Neurotic & other depressive disorders	1,083	42%	7%	11%	1%	9%	16%	35%
Personality disorders	29	45%	10%	17%	3%	3%	17%	24%
Other mental disorders	35	17%	11%	11%	6%	14%	14%	46%
Special symptoms or syndromes	191	17%	5%	8%	0%	4%	5%	57%
Stress & adjustment reactions	3,369	15%	3%	5%	0%	9%	7%	53%
Conduct disorders	613	20%	8%	8%	1%	16%	13%	46%
Emotional disturbances	1,000	24%	7%	6%	1%	18%	14%	43%
Hyperkinetic syndrome	2,188	26%	7%	6%	1%	75%	25%	10%
No Diagnosis	1	100%	0%	0%	0%	0%	0%	0%
Total	9,458	26%	8%	8%	2%	26%	16%	52%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 8
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 22 TO 64 WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
NEW HAMPSHIRE, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	1,505	46%	93%	42%	12%	1%	67%	1%
Major depression and affective psychoses	2,411	77%	39%	57%	13%	3%	65%	6%
Other psychoses	229	43%	76%	42%	3%	0%	55%	7%
Childhood psychoses	36	56%	31%	47%	3%	0%	36%	8%
Neurotic & other depressive disorders	2,024	72%	15%	53%	2%	2%	49%	12%
Personality disorders	370	77%	42%	55%	6%	4%	63%	9%
Other mental disorders	92	53%	32%	34%	4%	3%	40%	18%
Special symptoms or syndromes	117	56%	14%	32%	0%	1%	27%	29%
Stress & adjustment reactions	1,352	55%	15%	40%	2%	2%	37%	26%
Conduct disorders	96	48%	29%	40%	3%	3%	39%	21%
Emotional disturbances	5	60%	0%	20%	0%	0%	20%	40%
Hyperkinetic syndrome	71	46%	7%	30%	1%	55%	46%	17%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	8,308	64%	39%	49%	7%	3%	55%	17%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 9
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 65 AND OLDER WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
NEW HAMPSHIRE, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	252	39%	87%	40%	6%	1%	56%	5%
Major depression and affective psychoses	374	75%	53%	56%	13%	2%	71%	3%
Other psychoses	237	44%	46%	38%	1%	1%	43%	29%
Childhood psychoses	1	100%	0%	100%	0%	0%	100%	0%
Neurotic & other depressive disorders	388	74%	38%	53%	0%	3%	59%	10%
Personality disorders	18	83%	61%	56%	0%	0%	67%	6%
Other mental disorders	58	31%	22%	38%	2%	0%	28%	38%
Special symptoms or syndromes	3	33%	33%	100%	0%	0%	67%	0%
Stress & adjustment reactions	89	71%	33%	51%	0%	4%	53%	12%
Conduct disorders	2	100%	50%	50%	0%	0%	100%	0%
Emotional disturbances	1	100%	100%	100%	0%	0%	100%	0%
Hyperkinetic syndrome	1	0%	0%	0%	0%	0%	0%	100%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	1,424	61%	51%	49%	5%	2%	57%	14%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).